

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

M2 SEP 20 AM

1. The name of the limited liability company is: Pacific Viay Concepts LLC.		(Instructions on back	of application)
Pacific Viny Concepts LLC. 2. The street address of the initial registered office is: 3 Lots Taylon Dr. Nower, Tolon 93686 and the name of the initial registered agent at the above address is: Lic Breshears 3. The mailing address for future correspondence is: 3 Lots Taylon Dr. Nower, Tolon 83686 4. Management of the limited liability company will be vested in: Manager(s) Or Member(s) (please check the appropriate box) 5. If management is to be vested in one or more manager(s), list the name(s) and address(es) or at least one initial manager. If management is to be vested in the member(s), list the name(s) and address(es) of at least one initial member. Name Address Lec Breshears Jalos Taylon Dr. Nower D 93691 Signature of at least one person responsible for forming the limited liability company: Signature Signature Of at least one person responsible for forming the limited liability company: Signature Signature Of at least one person responsible for forming the limited liability company: Signature Signature Of at least one person responsible for forming the limited liability company: Signature Signature Of at least one person responsible for forming the limited liability company: Signature Signature Of at least one person responsible for forming the limited liability company: Signature Signature Of at least one person responsible for forming the limited liability company: Signature Signature Of at least one person responsible for forming the limited liability company: Signature Signature Of at least one person responsible for forming the limited liability company: Signature Signature Of at least one initial member.			pany is: STATE A STATE
2. The street address of the initial registered office is: 3645 Taylon Dr. Nonga, Toloho 87686 and the name of the initial registered agent at the above address is: Lec Breshears 3. The mailing address for future correspondence is: 3645 Taylon Dr. Nounce, Toloho 87686 4. Management of the limited liability company will be vested in: Manager(s) or Member(s) [please check the appropriate box) 5. If management is to be vested in one or more manager(s), list the name(s) and address(es) or at least one initial manager. If management is to be vested in the member(s), list the name(s) and address(es) of at least one initial member. Name Address Lec Breshears Jalos Taylon Dr. Nounce, Dr. Nou			
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3. The mailing address for future correspondence is: 3 lots Tender Dr. Name, Take 83686 4. Management of the limited liability company will be vested in: Manager(s) or Member(s) (please check the appropriate box) 5. If management is to be vested in one or more manager(s), list the name(s) and address(es) or at least one initial manager. If management is to be vested in the member(s), list the name(s) and address(es) of at least one initial member. Name Address Address Address Acc Breshears John Dr. Name 33696 Signature of at least one person responsible for forming the limited liability company: Signature Signature Of State use only Signature Typed Name: Signature Typed Name: 10AMO SECRETORY OF STATE OF THE STATE			
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